

MHN

JANUARY 4, 2008

MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURT

RECEIVED

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION

DEC 13 2007 *new*  
DEC 13 2007  
MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURT

James M. Northern

(Enter above the full name  
of the plaintiff or plaintiffs in  
this action)

vs.

Case No: 07 C 6687  
(To be supplied by the Clerk of this Court)

DR. Carasquillo

DR. A. Ting

paramedic Ms. Douglas

TOM Dart-Sheriff

Chief Wright

Dir. Salvador Godinez

(Enter above the full name of ALL  
defendants in this action. Do not  
use "et al.")

CHECK ONE ONLY: AMENDED

☒

COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983  
U.S. Code (state, county, or municipal defendants)

☐

COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE  
28 SECTION 1331 U.S. Code (federal defendants)

☐

OTHER (cite statute, if known)

**BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR  
FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.**

## II. Defendant(s):

D. Defendant: Chief Wright

Title: Chief Cpt of operations.

Place of employment: Cook County Jail

E. Defendant: Salvador Godinez

Title: Director of Cook County Jail

Place of employment: Cook County Jail

F. Defendant: Ms. Colon - Receiving Nurse.

Title: Nurse in Receiving

Place of employment: Cook County Jail

G. Defendant: Ms. Williams

Title: psych intern - Receiving.

Place of employment: Cook County Jail

H. Defendant: Gary Hickerson

Title: Superintendent of Division 5

Place of employment: Cook County Jail.

**I. Plaintiff(s):**

- A. Name: JAMES M. WORTHEM
- B. List all aliases: DAVID SCOTT
- C. Prisoner identification number: 2007-0071905
- D. Place of present confinement: COOK COUNTY JAIL
- E. Address: P.O. Box 089002, Chicago IL, 60608

(If there is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. number, place of confinement, and current address according to the above format on a separate sheet of paper.)

**II. Defendant(s):**

(In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C.)

- A. Defendant: MS. CARAQUILLO  
 Title: DOCTOR  
 Place of Employment: COOK COUNTY JAIL
- B. Defendant: MR. A. TING  
 Title: DOCTOR  
 Place of Employment: COOK COUNTY JAIL
- C. Defendant: TOM DART  
 Title: SHERIFF OF COOK COUNTY  
 Place of Employment: COOK COUNTY JAIL

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

**III. List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court in the United States:**

- A. Name of case and docket number: 07-C-6589
- B. Approximate date of filing lawsuit: 11/21/07
- C. List all plaintiffs (if you had co-plaintiffs), including any aliases: James M Worthem AKA David Scott
- D. List all defendants: Salvador Godinez, Sgt Moore, 90 Cook, 90 O-malley, 90 Boyle, etc.
- E. Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): Northern District of Illinois
- F. Name of judge to whom case was assigned: Magistrate Judge Cole
- G. Basic claim made: ~~Health care~~ Assault by Sheriff and a separate assault by Detainee of whom Got a Felony assault charge
- H. Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): Still pending.
- I. Approximate date of disposition: ?

**IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.**

#### IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

My head trauma first started on 6/9/06 in an Indiana Super 8 motel. then on 4/23/07 I did suffer more head and physical assaults to my person by C.P.D. upon there arrest of my person, then on 7/25/07 I was beaten all over my head, face and body by I.D.O.C. inmates with hand cuffs used as their weapon. I was then beaten by a Cook County deputy in Skokie "Boyle" in front of a Judge and outside the court room, I never received any further Medical Attention as a result of that incident after I was taken to Rush North Shore Hospital, then on 10/13/07 I was in my cell and another Detainee "Marcus Dixon" of whom spit in my face and some landing in my Mouth and Dr. Carasquillo told me that on that Day When I was seen by Med-Staff Nurse Colon and Psych MS Williams that they should of sent me to the E.R. for blood works for bodily fluids contamination and that was Nurse Colon and even

Dr. Carasquillo is guilty of violations Due to her not affording me that Medical need also, and then she broke Doctor/patient privilege by Disrespecting Me in front of other staff by telling me the only way I could of gotten spit in my mouth is if the spitter put his tongue in my mouth and very degrading, She even seen all the sores in my mouth. then she and Dr. ting continues to give me the wrong Medications for all these Red Spotted break outs all over my body and when Dr. ting said I might be allergic to something I'm wearing or do to sheets I was given a prescription for clothing change but % Sandoval Gave it to Chief Wright and he stated "who does this guy think he is and threw it in the Garbage, on 11/18<sup>15N</sup>/07 I was taken to receiving on these Red spotted break outs and Paramedic Douglas of whom has also Denied me A Renewal on my Astha pump 3X now, She was Suppose to send me to the E.R. Also concerning these Red break outs but Refused. I also showed these Red spots to Supt Hickerson of whom also ignored it and Denied me medical Attention and Since Director Godinez Should be aware of all incidents that occurs down the line and Sheriff Tom Dart is Responsible for the Safety and security and Health issues of all he tends to keep in his Jail then he is as Guilty <sup>Revised 12/9/2007</sup> as the ones who work for him. Thank you. I repeatedly complain of back/head pains from all my serious Assaults but am Denied Medical Proper attention.

**V. Relief:**

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

Just that your magistrate see that I am A Victim  
 of Medical Malpractice and cruel and unusual punishments.  
 I would like the court to award me with punitive  
 and compensatory Damages for Mental Anguish, Physical  
 Pain and suffering, and 20 million Dollars for C.C.D.C.  
 officials ignoring my serious medical issues and Attorneys  
 fees. Thank you very much.

VI. The plaintiff demands that the case be tried by a jury. ☒ YES ☒ NO

**CERTIFICATION**

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 6<sup>th</sup> day of Dec, 2007

James M Worthem

(Signature of plaintiff or plaintiffs)

James M Worthem  
 (Print name)

2007-0071905  
 (I.D. Number)

James M Worthem

P.O. Box 089002

Chicago IL, 60608  
 (Address)



Case # 07-C-6687  
 CAN - please have a copy of  
 this also. Thank you.

Part-A / Control #: 2007 X 2344

Referred To: SUPT. DIV. # 5

☐ Processed as a request.

## COOK COUNTY DEPARTMENT OF CORRECTIONS DETAINEE GRIEVANCE

Detainee Last Name: AKA Scott Northern First Name: AKA David James

ID #: 2007-0071905 Div.: 5 Living Unit: D-06 Date: 11/21/07

BRIEF SUMMARY OF THE COMPLAINT: I ARRIVED back on 1-0-07 11/6/07  
and on 11/8/07 I noticed the Shower floor stopped up with  
filthy water due to Drain back up and I and other Detainees  
brought it immediately to the attention of CT. Julian and  
other C.C.S. officials of whom constantly overlooks simple  
Matters that concern Health issues and safety and sanitation  
Nothing has been done of this problem and I and other  
Detainees now have athletes foot and toe fungus bad. Also as  
MR. Hickerson Has Responded to my other Grievance on the  
Matter of food handling, NO Detainees are yet wearing gloves  
Gloves, nor hats upon the issuance of food trays. why? also  
why are not my cell and other cells have any hot water?  
This is an illegal issue and C.C.S. officials are extremely  
Guilty of Abusing their powers to lock up Detainees with

NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT: Gary Hickerson, CT. Julian, CT McKill, All Detainees, Plumber, MR. COOK,  
JOE KRITZ, JOE FUNCHES, JOE SANDOVAL, SGT. ROBINSON, Director, Chief

ACTION THAT YOU ARE REQUESTING: That these issues be attended to once and for  
all, I am being forced to live under viable living conditions and I  
live in a building that should be condemned. I AM INVAOLVING COME  
Attend violations on state and federal Guidelines and will seek  
actions on state and federal.

DETAINEE SIGNATURE: James Northern, AKA David Scott

C.R.W.'S SIGNATURE: A. Jewanski

DATE C.R.W. RECEIVED: 11/23/07

Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.  
 All appeals must be made in writing and directly submitted to the Superintendent.